

# APPLICATION

## M.S.H.A. INSTRUCTOR CERTIFICATION

Date of Application:\_\_\_\_\_

Class Dates:\_\_\_\_\_

Name:\_\_\_\_\_

E-mail Address:\_\_\_\_\_

**Home** Mailing Address:\_\_\_\_\_

\_\_\_\_\_

**Home** Telephone #:\_\_\_\_\_

Current Position Title:\_\_\_\_\_

**Company** Name:\_\_\_\_\_

**Company** Mailing Address:\_\_\_\_\_

\_\_\_\_\_

**Company** E-mail Address:\_\_\_\_\_

**Company** Telephone #:\_\_\_\_\_

**Company** Fax #:\_\_\_\_\_

**Company** MSHA Mine ID#:\_\_\_\_\_

Dear Applicant,

Thank you for your interest in attending the MSHA Instructor Certification Course. Enclosed is the course registration packet. The completed information needs to be returned 6 weeks prior to the class start date.

Upon receipt of your completed application form the Review Committee will assess your application, mining experience, and teaching experience. A minimum of 5 years mining experience and 5 years teaching/training experience are required. Successful applicants will be notified of approval or denial 2 to 3 weeks prior to the next available class. The five day class will be held from 8:00 a.m. to 5:00 p.m. each day. The next MSHA Instructor Training class will be posted on the Arizona State Mine Inspector web site. [www.asmi.as.gov](http://www.asmi.as.gov)

Denied applicants will be notified 2 to 3 weeks prior to schedules class dates.

\*\*\*A registration fee of \$425.00 will be required after you have been accepted into the class and on or before the first day of the class.

Please address questions or comments to the Arizona State Mine Inspector at 602-542-7317 or by mail to Arizona State Mine Inspector, 1700 West Washington, Suite #403, Phoenix, Arizona 85007-2805, or E-mail ASMI Education and Training Manager, Frank Rabago at [frabago@asmi.az.gov](mailto:frabago@asmi.az.gov) or Tony Provencio, Mike Failla or Ted Johnson at [tprovencio@asmi.az.gov](mailto:tprovencio@asmi.az.gov) or [mfailla@asmi.az.gov](mailto:mfailla@asmi.az.gov) or [tjohnson@asmi.az.gov](mailto:tjohnson@asmi.az.gov)

Sincerely,

Education and Training Department  
Arizona State Mine Inspector's Office

Enclosures

\*(Please make checks payable to Arizona State Mine Inspector)

## MSHA INSTRUCTOR TRAINER

### APPLICATION/RESUME REQUIREMENTS

1. Applicant's full name, home mailing address, home telephone number, E-mail address, employer, and current 5000.23 form.
2. Company name, employer's mailing address, telephone number, Fax number, MSHA Mine Identification number.
3. Please indicate which instructor trainer certification you desire.
  - a. Surface or underground.
  - b. Coal, Metal, or nonmetal.
  - c. Any combination of a and b.
  - d. Specific topic for training (example electrical).
4. Mining experience—name of company, mine name, location, job title; job classification, details of type of work performed in each classification, and years of service.
  - a. Underground coal.
  - b. Underground metal
  - c. Underground nonmetal.
  - d. Surface coal.
  - e. Surface metal.
  - f. Surface nonmetal.
5. Certification of Teaching Experience.
  - a. Safety meetings taught (*year & location*).
  - b. Training classes taught (*year & location*).
  - c. Mining subjects taught (*year & location*).
  - d. Other classes taught (*year & location*).
6. Training received.
  - a. High School Diploma (*year & location*).
  - b. Vocational Technology Diploma/certificate (*year & location*).
  - c. Job/Task Training (*year & location*).
  - d. College, University Type of Studies, Degree (*year & location*).
  - e. Mining Training school (*year & location*).

- f. MSHA/Mining related training (*year & location*).
7. Please state the reason you want to be an instructor, what your qualifications are, and why you would be an excellent instructor.

APPLICATION FOR APPROVED INSTRUCTOR  
30 CFR, Parts 48.3h(2), 48.23h (2), and 49.8d

NAME	48.5	New Miner Training	Underground
	48.6	Experienced Miner Training	Underground
	48.8	Annual Refresher Training	Underground
	48.25	New Miner Training	Surface
	48.26	Experienced Miner Training	Surface
	48.28	Annual Refresher Training	Surface

EMPLOYER \_\_\_\_\_ SSN: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_ MINE ID: \_\_\_\_\_  
 CITY: \_\_\_\_\_ STATE \_\_\_\_\_ WORK PHONE: \_\_\_\_\_  
 ZIP CODE: \_\_\_\_\_

\*Please check the box next to the program areas for which you request approval\*

CERTIFICATION OF MINING EXPERIENCE

Underground Coal \_\_\_\_\_ years Surface Coal \_\_\_\_\_ years  
 Underground Metal \_\_\_\_\_ years Surface Metal \_\_\_\_\_ years  
 Underground Nonmetal \_\_\_\_\_ years Surface Nonmetal \_\_\_\_\_ years

Mining Experience

Job Title: Classification	Years	Details

CERTIFICATION OF INSTRUCTIONAL EXPERIENCE

Safety Meetings \_\_\_\_\_ years Job(task) Training \_\_\_\_\_ years  
 College/University \_\_\_\_\_ years Mining Training School \_\_\_\_\_ years  
 Vo-tech \_\_\_\_\_ years  
 Other \_\_\_\_\_ years

Mining Subjects Taught	Years	Health and Safety Subjects Taught	Years

PART 48 TRAINING RECEIVED

Date	Course

I certify that the above information is true and correct. False certification is punishable under Section 110(a) and (f) of the Federal Mine Safety and Health Act (Public Law 91-173 as amended by Public Law 95-164).

Signature \_\_\_\_\_ Date \_\_\_\_\_